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## \*BIBDATASHEET\*

CONFIRMATION NO. 2281

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/811,536	<b>FILING OR 371(c) DATE</b> 03/29/2004 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3735	<b>ATTORNEY DOCKET NO.</b> SYN-034 C2
<b>APPLICANTS</b> Charles R. Slater, Fort Lauderdale, FL; Thomas O. Bales, Coral Gables, FL;				
<b>** CONTINUING DATA *****</b> This application is a CON of 10/295,658 11/15/2002 PAT 6,712,752 which is a CON of 09/514,787 02/28/2000 PAT 6,482,143 which is a CIP of 09/371,243 08/10/1999 PAT 6,200,258				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 06/08/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> FL	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 20
<b>INDEPENDENT CLAIMS</b> 5				
<b>ADDRESS</b> 36822				
<b>TITLE</b> RADIOACTIVE THERAPEUTIC SEED HAVING SELECTIVE MARKER CONFIGURATION				
<b>FILING FEE RECEIVED</b> 836	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	